



Dana E. Blackwell
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LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

COMMISSIONERS:
CAROL O. BIONDI, VICE CHAIR
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DR. LA-DORIS MCCLANEY
SANDRA RUDNICK
ADELINA SORKIN, LCSW/ACSW
DR. HARRIETTE WILLIAMS, CHAIR

APPROVED MINUTES

The General Meeting of the Commission for Children and Families was held on Monday, **November 1, 2004**, in room 140 of the Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles. **Please note that these minutes are intended as a summary and not as a verbatim transcription of events at this meeting.**

COMMISSIONERS PRESENT (Quorum Established)

Carol O. Biondi
Joyce Fahey
Phalen G. Hurewitz
Helen Kleinberg
Daisy Ma
Christina S. Mattingly
Sandra Rudnick

COMMISSIONERS ABSENT (Excused/Unexcused)

Patricia Curry
Brenda Galloway
Dr. La-Doris McClaney
Adelina Sorkin
Dr. Harriette Williams

APPROVAL OF THE AGENDA

The agenda for the November 1, 2004, meeting was unanimously approved.

APPROVAL OF MINUTES

The minutes of the October 4, 2004, general meeting were held for a quorum of members who attended.

The minutes of the October 18, 2004, retreat were held for a quorum of members who attended.

CHAIR'S REPORT

Vice Chair Biondi presented the Chair's Report and chaired the meeting in the absence of Chair Harriette Williams.

- Vice Chair Biondi thanked Commission members for a successful retreat on October 18. Topics of discussion included reports the Commission is working on with the department, implementation of the work-group recommendations, and interagency collaboration with the Service Integration Bureau, as well as some overarching issues that include training, data collection, mental health, probation, and community capacity-building. Future agenda items agreed on included independent living, the group home contract, AB 129, Regional Centers, psychotropic medication, and so forth.
- Vice Chair Biondi attended the ninth annual New Beginnings conference and reported good participation from the department. Miriam Krinsky noted that the gathering addressed many different parts of the system and how to improve them. Panels that were particularly well received included those on structured decision-making, AB 408, and the needs of pregnant and parenting teens. Vice Chair Biondi asked that the Commission receive the handouts from the Pew Initiative on the actions it has taken since its May report; Ms. Krinsky suggested a presentation to the Commission on the Home at Last Initiative at a future date.
- If Commissioners have ideas regarding the Commission's annual holiday luncheon, please let staff member Elizabeth Hinton know. The luncheon traditionally takes place at the Commission's second meeting in December.

DIRECTOR'S REPORT

- Dr. David Sanders reported that two offices—Compton and Wateridge—have fully implemented point of engagement, and a meeting with regional administrators has explored its expansion to all offices. The initiative's goal is a culture change that will support families to stay together or reunite quickly. Though offices may use slightly different approaches, the four elements they must have in place prior to implementation are:
 - Alternative response, to connect families having unfounded/inconclusive investigations with community resources
 - An expanded capacity to provide family preservation services, working with community agencies
 - Team decision-making prior to any detention
 - An overlap between the emergency response worker and the ongoing worker (rather than the historical 30-day involvement of the emergency response worker succeeded by a referral to an ongoing worker that may not be followed up on for some time)

An implementation plan will be identified next month. The union is asking for staffing levels at 120 percent, and five or six offices meet that requirement.

Commissioner Kleinberg expressed her concern about the team decision-making element, asking if the requirement was that the team meet only once. Will a facilitator be involved? How will facilitators be funded? It is a time-consuming process, especially when it involves private sector partners. Dr. Sanders said that one instance of team decision-making is definitely required before every detention, and the intention is to continue the team meetings to follow the child's progress.

For cases in which team decision-making was not done prior to detention, Commissioner Hurewitz asked, are there plans to apply that approach? That depends on the capacity of the individual office, Dr. Sanders said, though the goal is that all decisions are ultimately made in that way. If the momentum gathers, Commissioner Hurewitz said, offices could be transformed.

Commissioner Kleinberg noted that a strength-based approach is not outlined in any of the four elements, and asked if there would be training in that regard. Dr. Sanders replied that the four elements are structural components, while the strength-based approach is more of an underlying philosophy. Point-of-engagement training will take place for each office prior to January.

The model used in Compton, partnering with SHIELDS for Families, works because of SHIELDS' broad array of services, which includes alcohol and drug abuse treatment. Commissioner Kleinberg asked if community services would be similarly configured in other areas; the second element specifies family preservation services only. In RFPs currently released for family support and other services, is there an effort to make these interconnections? Dr. Sanders agreed with the need for experts in a variety of services including substance abuse treatment, and said that offices will need to help develop community resources.

With the flexibility inherent in the four elements, Commissioner Hurewitz asked about including an intensive services worker. Dr. Sanders said that some regional administrators are concerned about introducing a third worker to the child (emergency response, intensive services, and ongoing) within a couple of months, preferring to limit the model to two workers. They will have to see which approach works better.

- A two-day retreat on concurrent planning took place in October that sorted out implementation issues with the union, and set this initiative's implementation date for January 2005. The adoption worker will focus on the child, while the ongoing worker will focus on the family. Changes in the following areas will occur:
 - The role of the adoption worker will overlap with that of the ongoing worker, so that an adoption worker becomes involved no later than six months into a treatment case.
 - The ongoing worker will keep the case to permanency.

- A dependency investigator will perform the due diligence, noticing, etc., regarding the termination of parental rights, which should reduce the number of court continuances (each of which can delay a case by four months).

Five offices—nearly half the department—now have these elements in place.

Commissioner Hurewitz asked how a decision is reached to do concurrent planning in a given case. Dr. Sanders explained that the structure should apply to every child, rather than the current method of the adoption worker becoming involved only with the initial activation for adoption.

Commissioner Kleinberg expressed her worry that families may be being told they need family preservation services, for instance, and the six-month clock may be ticking, but services may not be available within their communities. Dr. Sanders said that situation was the reason for point of engagement, and was part of the challenge of culture change. Leadership staff within the regional offices will need to build capacity in the community, a different role than they have historically played.

Vice Chair Biondi asked for a current directory of community-based services, which she was told is updated online by Childrens Hospital at www.healthycity.org. Commissioner Kleinberg stressed that workers cannot just provide families with a list of names, but must know the appropriate agencies in the area and help families make contacts.

- The pilot of the Permanency Partners Program (P³) is underway in the Lakewood office with 31 referrals. With a budget of \$1 million, this program—which mines case files for historical connections who could provide lifelong relationships—targets youth over the age of 12 who have been in care for over two years and have no permanency plan.

Commissioner Fahey asked if any freed minors were involved in the pilot, encouraging a meaningful due-diligence search that re-evaluates birth families and those relatives who may have been previously uninvolved with the child. Dr. Sanders has anecdotal evidence that shows that is being done.

In answer to a question from Vice Chair Biondi regarding the numbers of children involved in these initiatives, Dr. Sanders said that approximately 800 children have had their parental rights terminated and are seeking adoptive families. The adoption caseload of approximately 2,700 children is down by about 150 this year. He was not sure of the numbers of families awaiting home studies, though the foster-care and adoptions home studies have been standardized and merged.

The number of children potentially eligible for the Permanency Partners Program is quite large: 8,000 children are between the ages of 14 and 18, and only about 3,000 of those are placed with relatives. The P³ pool could be upwards of 4,000 children.

COMMITTEE REPORTS

Children's Planning Council

Commissioner Rudnick reported that the Children's Planning Council is studying the California Performance Review and its 43 recommendations for improving services in Los Angeles County. To address the county's five outcome measures—good health, safety and survival, economic well-being, social and emotional well-being, and achievement and workforce readiness—the council has identified several recommendations on which to focus. These include:

- Improving partnerships between state and local governments
- Transforming the eligibility process for CalWORKs, Medi-Cal, and food stamps
- Easing strictures on foster-care criminal background checks so that new ones are not necessary if foster parents move from county to county
- Standardizing criminal background checks for all health and human services
- Retaining state assistance in child support payments for TANF recipients
- Preserving Federal K–12 nutritional funds

First 5 L.A.

Commissioner Hurewitz reported that First 5 L.A. has funded several projects over the last year:

- Universal preschool/early education, creating a separate nonprofit entity that is in the process of gathering its board members and hiring an executive director
- Partnership for Families, a strength-based program emphasizing the secondary prevention of child maltreatment by targeting populations such as families with inconclusive investigations, pregnant women endangered by domestic violence, teen parents, gang-involved youngsters, newborns with specific risk factors, etc.
- Healthy Kids, which seeks to enroll children whose families earn below 300 percent of poverty into health insurance programs
- L.A. Connect, a parent information warmline

According to Jacquelyn McCroskey, also a First 5 commissioner, the Partnership for Families consultant team has been working with the department over the past six months to focus on existing services. The First 5 Commission will hear in January about a possible RFP for community networks to provide secondary prevention services. The Social Welfare department at UCLA has been named the principal investigator of the Partnership for Families evaluation—budgeted at \$2.5 million—that hosted a series of community outreach forums in September.

Commissioner Kleinberg asked if departmental workers routinely asked whether children have health insurance, and Dr. Sanders said he would find out.

Education Coordinating Council

Commissioner Kleinberg thanked the Children's Law Center for its involvement in the formation of the council, noting that the two education summits held over the last two

years had yielded a large number of recommendations for improving the education of children within the county system. School districts, county government, and cities all agree that the focus on these children needs to reach beyond the standardized testing that is consuming the attention of school authorities these days.

The Board of Supervisors voted in January to form the Education Coordinating Council (ECC), and both county and private foundation support has been obtained. Sharon Watson is heading up the consultant group that is publicizing the ECC and helping to put it together. An invitational meeting on November 15 will be held for individuals responsible for communicating about the ECC to the community, and a meeting of the council's core group is scheduled for January 2005. The Children's Planning Council Foundation, Inc., will serve as fiscal agent for the ECC.

DEPARTMENTAL AUTOMATION PLAN

Leo Yu introduced his team and thanked Dr. Sanders for his support of information technology as a strategic product. Mr. Yu then went through the automation plan developed by the department's Bureau of Information Services, which is working closely with the county's Chief Information Office to convert and consolidate old, isolated systems and databases into a new integrated environment. Products already available, in final testing, or on the drawing board fall into four categories:

- Automated workflow and monitoring, including an electronic document management system and several tracking and reporting systems
- Measurement and decision support tools, including utilization reports for various initiatives, financial modeling, and a provider contract management system
- Planning, reminders, and assistance, including myCSW, a system that allows workers to display and track information about their caseloads
- Accessibility, which includes the possibility of accessing CWS/CMS through the Internet

The departmental outcomes supported by these products include:

- The achievement of departmental goals
- Accurate and timely data input
- Productive workers
- Better information
- Educated decisions
- The optimization of resources
- Quicker response

As part of his report, Mr. Yu reviewed screens from the prototype of myCSW, which presents information from the state's CWS/CMS system in a format that will allow children's social workers (CSWs) to more easily manage their caseloads over the Internet or, potentially, on a personal digital assistant device. The product's one limitation is that data can be input and updated only in CWS/CMS.

Mr. Yu encouraged Commissioners to visit <http://dcfs.co.la.ca.us> to see the department's website redesign implemented in May; since that time, the website has received over a million hits. (The L.A. Kids site is internal to the county, and may be accessed by Commissioners from the Commission office.)

Commissioner Kleinberg asked how the success of point of engagement and other new projects would be tracked, since she sees no reference in the bureau's report to the four elements mentioned by Dr. Sanders or to reunification. Mr. Yu clarified that point of engagement is part of concurrent planning, and Cecilia Custodio explained that myCSW is the ground-floor overview of all tracking mechanisms by individual case, with alerts that prompt workers to proceed with the next steps in each process. The next tracking level is mySCSW, for supervisors, which feeds up to the regional administrator level and thence to department-wide reporting tools. In response to Commissioner Kleinberg's question about the community service piece, Ms. Custodio said that each office identifies community agencies that are involved in, for example, the family preservation system, and tracks services provided to families. For families not in the system, offices will determine the milestones.

Commissioner Kleinberg then asked if the outcomes of children in the Compton office were being tracked, and Ms. Custodio said that a six-month report would be available soon. She added that the numbers of families who have been reunified are always available as well.

One of the bureau's goals, Mr. Yu said, is to display community resources in a geographic format, where users can float a mouse over a certain area and show addresses for schools, police stations, hospitals, abuse centers, and so forth. A database is being built with the help of InfoLine and Healthy Cities, Healthy Families.

Commissioner Rudnick expressed her concern that, because data in myCSW cannot be updated, workers may be using outdated information. Mr. Yu assured her that updates from CWS/CMS would be downloaded daily and would remain secure. Commissioner Fahey expressed her hope for more of a family focus, remarking on the lack of information on family members, services provided, and visitations on the myCSW pages. Mr. Yu made it clear that the pages in this presentation are only a sample, and that workers could drill down for that information. The system's design will be a work in progress as users provide feedback. Ms. Custodio added that all information input into CWS/CMS would be available in myCSW, including any services for families required in the case plan.

Vice Chair Biondi said that it had always been her impression that it was up to the CSW's discretion whether or not certain data was input into CWS/CMS. Who will be responsible for entering the information that appears? Ms. Custodio said that different staff, including clerks, may be responsible for entering different data. Mr. Yu pointed out that CSW performance reviews will be based on how accurately and comprehensively the information is maintained.

Commissioner Fahey noted that around the time of a six-month report, work is done and attention is paid to a case, but she emphasized the need for meaningful services to be provided prior to that time. She sees no field in myCSW that would alert workers to the fact that necessary processes have not yet begun. Mr. Yu said that the calendar page contains icons that remind workers of tasks to do ahead of time, and e-mail reminders regarding workflow are also planned so that their memories will be continually jogged.

Vice Chair Biondi noticed that the child's Social Security number does not display in myCSW, and suggested that the system trigger the worker in some way to apply for a number if the child does not have one. All children receiving Medi-Cal have Social Security numbers, so it is likely that most have them even if they are not input into CWS/CMS.

Because of the limitations of CWS/CMS, which can be changed only by the state, Commissioner Hurewitz commended the development of myCSW as a supplement. He mentioned that the Katie A. panel, which presented to the Commission at its last meeting, is not receiving data on some issues, and asked if the bureau can undertake to supply that information. Ms. Custodio said that bureau staff are working with the Department of Mental Health on a memorandum of understanding so they can import data about shared clients. The Service Integration Bureau is also working with the departments of Children and Family Services, Mental Health, and Public Social Services to match information on their common clients.

Vice Chair Ma asked about the electronic court reports that Mr. Yu mentioned as a way to reduce paperwork. Will they be able to be read and printed only, or can they be edited? Because they are legal documents, Mr. Yu said, they will be transmitted as images that initially will simply be passed along electronically. At some point in the future, annotations will be possible, but the original document will remain unchanged. If necessary, a revised document can be generated that will replace the original.

PUBLIC COMMENT

Roné Ellis requested a copy of Mr. Yu's report and asked the whereabouts of the November 15 meeting regarding the Education Coordinating Council.

MEETING ADJOURNED